

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA
2001/02
FORM **460**

Date Stamp

Statement covers period
from 07/01/2017
through 12/31/2017

Date of election if applicable:
(Month, Day, Year)
06/05/2018

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For Official Use Only

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☒ State Candidate Election Committee
☐ Recall
(Also Complete Part 5.)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored
(Also Complete Part 6.)
☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☐ Pre-election Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1392928

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
GIPSON FOR ASSEMBLY 2018

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Inglewood</u>	<u>CA</u>	<u>90301-4604</u>	<u>(310)817-6679</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX/E-MAIL ADDRESS

310-672-6679 / mymsanders@politicalreportingplus.com

Treasurer(s)

NAME OF TREASURER
Michelle Moore Sanders

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Inglewood</u>	<u>CA</u>	<u>90301-4604</u>	<u>310-817-6679</u>

NAME OF ASSISTANT TREASURER, IF ANY
Cine D. Ivery

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Inglewood</u>	<u>CA</u>	<u>90301</u>	<u>310-817-6679</u>

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/31/2018 By Michelle Moore Sanders
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 01/31/2018 By Mike A. Gipson
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Mike Gipson

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Held: State Assembly Person
Assembly District

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Inglewood

CA

64

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

GIPSON FOR ASSEMBLY 2014

I.D. NUMBER

1373829

NAME OF TREASURER

Michelle Moore Sanders

CONTROLLED COMMITTEE?

☒ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY
Inglewood

STATE
CA

ZIP CODE
90301-4604

AREA CODE/PHONE
310-817-6679

COMMITTEE NAME

GIPSON FOR ASSEMBLY 2016

I.D. NUMBER

1382140

NAME OF TREASURER

Michelle Moore Sanders

CONTROLLED COMMITTEE?

☒ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY
Inglewood

STATE
CA

ZIP CODE
90301-4604

AREA CODE/PHONE
310-817-6679

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME FRIENDS OF MIKE GIPSON CITY COUNCIL 2013	I.D. NUMBER 1265606
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NAME OF TREASURER Michelle Moore Sanders	CONTROLLED COMMITTEE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY Inglewood	STATE CA	ZIP CODE 90301-4604	AREA CODE/PHONE 310-817-6679
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COMMITTEE NAME GIPSON FOR ASSEMBLY LEGAL DEFENSE FUND	I.D. NUMBER 1378039
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NAME OF TREASURER Michelle Moore Sanders	CONTROLLED COMMITTEE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY Inglewood	STATE CA	ZIP CODE 90301-4604	AREA CODE/PHONE 310-817-6679
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6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 07/01/2017 through 12/31/2017	CALIFORNIA FORM 460 Page 4 of 80 I.D. NUMBER 1392928
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

GIPSON FOR ASSEMBLY 2018

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$282,300.00	\$506,903.73
2. Loans Received	Schedule B, Line 7	\$0.00	\$3,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$282,300.00	\$509,903.73
4. Nonmonetary Contributions	Schedule C, Line 3	\$2,718.43	\$6,716.87
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$285,018.43	\$516,620.60

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$126,981.42	\$183,545.25
7. Loans Made	Schedule H, Line 7	\$41,000.00	\$41,000.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$167,981.42	\$224,545.25
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$17,681.28	\$26,503.52
10. Nonmonetary Adjustment	Schedule C, Line 3	\$2,718.43	\$6,716.87
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$188,381.13	\$257,765.64

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$170,984.27	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$282,300.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$167,981.42	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$285,302.85	
If this is a termination statement, Line 16 must be zero.			
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$0.00	

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$41,000.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$29,503.52

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 12/31/2017		Page 5 of 80
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/5/2017	DaVita Denver, CO 80202	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,650.00	\$4,400.00	2018P: \$4,400.00
7/7/2017	International Paper Political Action Committee Washington, DC 20004 Committee ID: 1318753	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
7/7/2017	Phillips 66 Washington, DC 20004	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,900.00	\$4,400.00	2018P: \$4,400.00
7/11/2017	Associated General Contractors PAC West Sacramento, CA 95691 Committee ID: 890194	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
7/11/2017	Check Into Cash of California, Inc. Cleveland, TN 37311	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$282,250.00
2. Amount received this period - unitemized contributions of less than \$100	\$50.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$282,300.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
Page <u>6</u> of <u>80</u>		
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/11/2017	Fresenius Medical Care Metairie, LA 70002	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$4,350.00	2018P: \$4,350.00
7/25/2017	Anheuser Busch Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2018P: \$4,400.00
7/25/2017	Axcess Financial Services, Inc. Cincinnati, OH 45236	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
7/25/2017	GEICO Government Employees Insurance Co. Washington, DC 20076-0001	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
7/25/2017	International Brotherhood of Electrical Workers Local Union 11 PAC Pasadena, CA 91101 Committee ID: 822725	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,500.00	\$8,500.00	2018P: \$8,500.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/25/2017	Southern California Pipe Trades District Council #16 Los Angeles, CA 90020 Committee ID: 760715	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$5,000.00	\$8,800.00	2018P: \$8,800.00
7/25/2017	The Travelers Indemnity Company Hartford, CT 06183	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
7/25/2017	UA Journeymen & Apprentices Local #250 Gardena, CA 90248 Committee ID: 743959	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$8,400.00	2018P: \$8,400.00
7/27/2017	AT&T Inc., and it's Affillates Sacramento, CA 95814 Committee ID: 478036	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$4,400.00	2018P: \$4,400.00
7/27/2017	Southern California District Council of Laborers PAC Sacramento, CA 95814 Committee ID: 1358150	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,800.00	\$8,800.00	2018P: \$8,800.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
Page <u>8</u> of <u>80</u>		
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/1/2017	Amgen, Inc. State Political Contributions Account Alexandria, VA 22303 Committee ID: 494059	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
8/1/2017	Facebook, Inc. Menlo Park, CA 94025	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2018P: \$4,400.00
8/4/2017	SempraEnergy San Diego, CA 92101-3017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$3,000.00	2018P: \$3,000.00
8/9/2017	Association of California Insurance Companies PAC Sacramento, CA 95814 Committee ID: 830078	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$2,500.00	2018P: \$2,500.00
8/9/2017	California Alarm Association PAC Sacramento, CA 95814 Committee ID: 870990	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460 Page <u>9</u> of <u>80</u> I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/11/2017	Abbvie Political Action Committee N.Chicago, IL 60064 Committee ID: 1357479	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
8/17/2017	aetna, Inc. Hartford, CT 06156-9132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
8/25/2017	Pfizer Inc. Memphis, TN 38115	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
8/25/2017	Sunovion Pharmaceuticals, Inc. Marlborough, MA 01752	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
8/25/2017	Walgreens Co. Deerfield, IL 60015	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2018P: \$3,000.00
SUBTOTAL						

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/29/2017	AFSCME California District Council 36 PAC Los Angeles, CA 90020	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
8/29/2017	CAAPAC California Apartment Assoc. Political Action Committee Sacramento, CA 95814 Committee ID: 745208	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
8/29/2017	California Bankers Association State Political Action Committee - All Purpose Account Sacramento, CA 95814 Committee ID: 742694	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
8/29/2017	CapitalOne McLean, VA 22102	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
8/29/2017	E&B Natural Resources MGMT. Corp. Bakersfield, CA 93308	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$2,500.00	2018P: \$2,500.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/29/2017	Motion Picture Association of America California PAC Sherman Oaks, CA 91403 Committee ID: 901889	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
8/30/2017	California Building Industry Assoc. PAC Sacramento, CA 95814 Committee ID: 890483	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$2,500.00	2018P: \$2,500.00
9/5/2017	Laborer's Local 300 Los Angeles, CA 90006 Committee ID: 950674	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
9/6/2017	Apollo Education Group, Inc. Phoenix, AZ 85040	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
9/6/2017	Novartis Pharmaceuticals Corp Fort Worth, TX 76134	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/6/2017	Professional Engineers In California Government PECG-PAC Sacramento, CA 95814 Committee ID: 822501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$6,000.00	2018P: \$6,000.00
9/6/2017	SANOFI US SERVICES INC., EMPLOYEES' PAC Bridgewater, NJ 08807 Committee ID: C00144345	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
9/7/2017	Cooper & Brain, Inc. Wilmington, CA 90744	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
9/7/2017	Encore Capital Group, Inc. San Diego, CA 92123	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
9/7/2017	MOC Macpherson Oil Company Santa Monica, CA 90405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
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9/8/2017	CA Independent Petroleum Assn. CIPAC State PAC Rancho Santa Margari, CA 92688 Committee ID: 822237	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,500.00	\$4,329.94	2018P: \$4,329.94
9/11/2017	Peace Officers Research Association of California Political Action Committee (PORAC PAC) Sacramento, CA 95834 Committee ID: 810830	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,500.00	\$7,500.00	2018P: \$7,500.00
9/13/2017	Charter Schools PAC Sacramento, CA 95814 Committee ID: 1302433	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,800.00	\$6,200.00	2018P: \$4,400.00 2018G: \$1,800.00
9/13/2017	CRC Services, LLC Los Angeles, CA 90064	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2018P: \$4,400.00
9/13/2017	First American Title Insurance Company Scottsdale, AZ 85258	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
through 12/31/2017		Page 14 of 80
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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/13/2017	Southern California Pipe Trades District Council #16 Los Angeles, CA 90020 Committee ID: 760715	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$8,800.00	2018P: \$8,800.00
9/14/2017	National Peace Officers & Fire Fighters Benefit Association Trust Sacramento, CA 95814-3938	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
9/19/2017	CA Mortgage Bankers Assoc. PAC Sponsored by CA Mortgage Bankers Assoc. Sacramento, CA 95614 Committee ID: 890152	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
9/19/2017	Del Mar Thoroughbred Club Del Mar, CA 92014	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$750.00	\$750.00	2018P: \$750.00
9/22/2017	California New Car Dealers Association PAC Sacramento, CA 95814 Committee ID: 741623	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/26/2017	Carson Estate Trust Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$3,500.00	2018P: \$3,500.00
9/27/2017	United Airlines, Inc. San Francisco, CA 94128	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
9/29/2017	BreitBurn Operating, L.P. Houston, TX 77002	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
9/29/2017	PG&E San Francisco, CA 90501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,900.00	\$4,400.00	2018P: \$4,400.00
9/29/2017	Seneca Resources Corp. West Bakersfield, CA 93311	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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10/4/2017	California Physical Therapy PAC Sacramento, CA 95834 Committee ID: 780079	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2018P: \$500.00
10/4/2017	Genentech, Inc. South San Francisco, CA 94080	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
10/4/2017	The Doctors Company PAC Napa, CA 94558 Committee ID: 923140	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00	\$4,400.00	2018P: \$4,400.00
10/6/2017	Fresenius Medical Care Metairie, LA 70002	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,600.00	\$4,350.00	2018P: \$4,350.00
10/6/2017	Medical Insurance Exchange of California PAC Oakland, CA 94516 Committee ID: 1323065	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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10/6/2017	Western Manufactured Housing Communities Assn. PAC Sacramento, CA 95814 Committee ID: 742422	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,400.00	\$4,400.00	2018P: \$4,400.00
10/10/2017	CREPAC California Real Estate Political Action Committee Los Angeles, CA 90020 Committee ID: 890106	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
10/10/2017	Yocha Dehe Wintun Nation Brooks, CA 95606	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
10/16/2017	AT&T Inc., and it's Affillates Sacramento, CA 95814 Committee ID: 478036	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,400.00	\$4,400.00	2018P: \$4,400.00
10/16/2017	Southwest Airlines, Co. Washington, DC 20006	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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10/17/2017	The Boeing Company Political Action Committee Arlington, VA 22202-4208 Committee ID: C00142711	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
10/18/2017	AFSCME Local 3634 Los Angeles, CA 90020 Committee ID: 1255127	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
10/18/2017	Hal Dash Valencia, CA 91355	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Cerrell & Associates PR Executive	\$250.00	\$500.00	2018P: \$500.00
	INTERMEDIARY Anedot Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/18/2017	John Harris Los Angeles, CA 90017	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Harris and Associates Principal	\$1,000.00	\$1,000.00	2018P: \$1,000.00

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2017		
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	INTERMEDIARY Anedot Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/18/2017	Robert Hymers Los Angeles, CA 90071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pinnacle Tax Services, Inc. CPA	\$1,000.00	\$1,000.00	2018P: \$1,000.00
	INTERMEDIARY Anedot Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/18/2017	International Longshore and Warehouse Union Foremen's Local 94 Political Action Fund San Pedro, CA 90731 Committee ID: 1349650	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$3,800.00	2018P: \$3,800.00
10/18/2017	Levy Affiliated Holdings, LLC Santa Monica, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2018P: \$2,500.00
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	INTERMEDIARY Anedot Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/18/2017	SA Recycling Orange, CA 92865	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$1,500.00	2018P: \$1,500.00
10/18/2017	Signal Hill Petroleum, Inc. Signal Hill, CA 90755	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$2,000.00	2018P: \$2,000.00
10/18/2017	South Bay Cooperative, Inc. dba United Checker, Inc. Gardena, CA 90249	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$3,000.00	2018P: \$3,000.00
10/18/2017	Watson Land Company Carson, CA 90745	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$4,500.00	2018P: \$4,500.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
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10/18/2017	David Welch Los Angeles, CA 90071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	David R. Welch Law Attorney	\$2,500.00	\$2,500.00	2018P: \$2,500.00
	INTERMEDIARY Anedot Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
10/18/2017	Yellow Cab of South Bay Cooperative, Inc. Gardena, CA 90249	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$3,000.00	2018P: \$3,000.00
10/19/2017	USAA Reno, NV 89509	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00	\$3,000.00	2018P: \$3,000.00
10/26/2017	Cooperative of American Physicians State Political Action Committee Los Angeles, CA 90071 Committee ID: 760951	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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Amounts may be rounded
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2017	The Dentists Insurance Company Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
10/26/2017	Walgreens Co. Deerfield, IL 60015	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2018P: \$3,000.00
10/31/2017	Californians for Jobs & A Strong Economy Sacramento, CA 95811 Committee ID: 1275549	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,100.00	\$2,400.00	2018P: \$2,400.00
10/31/2017	Dart Container Mason, MI 48854-9547	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$4,500.00	2018P: \$4,400.00 2018G: \$100.00
10/31/2017	Dart Container Mason, MI 48854-9547	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,400.00	\$4,500.00	2018P: \$4,400.00 2018G: \$100.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/3/2017	California Permanente Medical Groups PAC Sacramento, CA 95814 Committee ID: 992303	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
11/3/2017	Charter Communications St. Louis, MO 83131-3674	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2018P: \$3,000.00
11/3/2017	Toni D. Johnson-Chavis M.D. Compton, CA 90221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Toni D. Johnson-Chavis, M.D. Physician	\$1,000.00	\$1,000.00	2018P: \$1,000.00
11/3/2017	Valero Services, Inc. San Antonio, TX 78249-1616	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2018P: \$4,400.00
11/8/2017	The Coca-Cola Company Los Angeles, CA 90021	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460
Page <u>24</u> of <u>80</u>		
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/9/2017	California Hospital Association PAC Sponsored by CA Association of Hospitals and Health System Sacramento, CA 95814 Committee ID: 790773	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$3,000.00	2018P: \$3,000.00
11/13/2017	International Union of Operating Engineers Local 12 Pasadena, CA 91103 Committee ID: 743030	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2018P: \$4,400.00
11/13/2017	Tesoro Companies, Inc. San Antonio, TX 78259	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
11/15/2017	California Optometric PAC Sacramento, CA 95814 Committee ID: 745825	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,800.00	\$8,800.00	2018P: \$8,800.00
11/15/2017	SempraEnergy San Diego, CA 92101-3017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$3,000.00	2018P: \$3,000.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/17/2017	DOCPAC of Georgia Napa, CA 94558	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,400.00	\$0.00	2018P: \$0.00
11/20/2017	OUTFRONT media Fairfield, NJ 07004	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,900.00	\$4,400.00	2018P: \$4,400.00
11/20/2017	Southern California Pipe Trades District Council #16 Los Angeles, CA 90020 Committee ID: 760715	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,300.00	\$8,800.00	2018P: \$8,800.00
11/20/2017	UA Journeymen & Apprentices Local #250 Gardena, CA 90248 Committee ID: 743959	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$3,400.00	\$8,400.00	2018P: \$8,400.00
11/28/2017	CALPAC - CALIFORNIA MEDICAL ASSOCIATION PAC Sacramento, CA 95814 Committee ID: 742617	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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11/28/2017	State Building and Construction Trades Council of California PAC Sacramento, CA 95814 Committee ID: 743501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2018P: \$2,500.00
12/6/2017	California Dental Political Action Committee Sacramento, CA 95814 Committee ID: 742855	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$4,400.00	\$6,400.00	2018P: \$6,400.00
12/6/2017	CCPOA POA Sacramento, CA 95814 Committee ID: 830349	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
12/6/2017	***RETURNED*** DOCPAC of Georgia Napa, CA 94558	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		(\$1,400.00)	\$0.00	2018P: \$0.00
12/8/2017	Eli Lilly and Company Political Action Committee Indianapolis, IN 42685 Committee ID: 990321	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

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12/8/2017	NRG Energy, Inc. Carlsbad, CA 92008	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
12/11/2017	Bulletin Display, LLC Long Beach, CA 90805	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
12/12/2017	Chevron Corporation Policy, Government and Public Affairs Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$4,400.00	2018P: \$4,400.00
12/12/2017	Nossaman LLP Los Angeles, CA 90017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
12/20/2017	International Longshore and Warehouse Union Local 13 PAC FUND San Pedro, CA 90731 Committee ID: 1226530	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,800.00	\$8,800.00	2018P: \$8,800.00
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12/20/2017	The Doctors Company PAC Napa, CA 94558 Committee ID: 923140	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,400.00	\$4,400.00	2018P: \$4,400.00
12/21/2017	California State Association of Electrical Workers Orange, CA 92868 Committee ID: 743107	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$5,000.00	\$5,000.00	2018P: \$5,000.00
12/21/2017	Hollywood Park Casino Company, Inc. Inglewood, CA 90303	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$1,500.00	2018P: \$1,500.00
12/21/2017	UA Journeymen & Apprentices Local #250 Gardena, CA 90248 Committee ID: 743959	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$8,400.00	2018P: \$8,400.00
12/23/2017	Sprinkler Fitters United Association 709 PAC Whittier, CA 90606 Committee ID: 901643	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$500.00	\$500.00	2018P: \$500.00
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SCHEDULE A (CONT.)

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through <u>12/31/2017</u>		
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12/26/2017	Exxon Mobil Corporation Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$2,000.00	2018P: \$2,000.00
12/27/2017	LACPPOA San Dimas, CA 91773 Committee ID: 970225	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2018P: \$2,500.00
12/28/2017	Clean Energy Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00	\$5,900.00	2018P: \$4,400.00 2018G: \$1,500.00
12/28/2017	E.M.E., Inc. Compton, CA 90221-1044	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2018P: \$500.00
12/28/2017	Mayer Brown LLP Chicago, IL 60604-1404	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
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12/28/2017	Planned Parenthood Advocacy Project Los Angeles County Action Fund Sacramento, CA 95814 Committee ID: 971616	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2018P: \$2,500.00
12/28/2017	The Lamar Companies Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	2018P: \$1,000.00
12/28/2017	Michele Townsend Laguna Hills, CA 92653-6148	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pacific Life Community Relations	\$2,500.00	\$2,500.00	2018P: \$2,500.00
	INTERMEDIARY Anedot Baton Rouge, LA 70808	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
12/29/2017	AFSCME American Federation of State, County and Municipal Employees, AFL-CIO Washington, DC 20036-5687 Committee ID: 745604	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$8,800.00	\$8,800.00	2018P: \$8,800.00
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460 Page <u>31</u> of <u>80</u> I.D. Number 1392928

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12/29/2017	Consumer Attorneys Association of Los Angeles Political Action Committee Los Angeles, CA 90017 Committee ID: 871554	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$1,500.00	2018P: \$1,500.00
12/29/2017	L.A. County Probation Officers Union AFSCME, Local 685 Political Action Fund Los Angeles, CA 90057 Committee ID: 744558	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$4,000.00	2018P: \$4,000.00
12/29/2017	Laborers' International Union of North America Local 1309 Lakewood, CA 90712 Committee ID: 851621	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$2,500.00	2018P: \$2,500.00
12/29/2017	Los Angeles Airport Peace Officers Association PAC Los Angeles, CA 90042 Committee ID: 1318235	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	2018P: \$500.00
12/29/2017	Jeanette E. Parker Beverly Hills, CA 90210-3040	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Golden Day Co Owner/Investor	\$2,200.00	\$4,400.00	2018P: \$4,400.00
SUBTOTAL						

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
		Page <u>32</u> of <u>80</u>
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2017	Professional Engineers In California Government PECG-PAC Sacramento, CA 95814 Committee ID: 822501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00	\$6,000.00	2018P: \$6,000.00
12/29/2017	Southwest Regional Council of Carpenters Political Action Fund Los Angeles, CA 90071 Committee ID: 870169	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,500.00	\$4,000.00	2018P: \$4,000.00
12/29/2017	The Bicycle Hotel Casino Bell Gardens, CA 90201-7517 Memo Reference: INC452	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$8,800.00	2018P: \$4,400.00 2018G: \$4,400.00
12/29/2017	The Bicycle Hotel Casino Bell Gardens, CA 90201-7517 Memo Reference: INC453	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,400.00	\$8,800.00	2018P: \$4,400.00 2018G: \$4,400.00
12/29/2017	UPSPAC Atlanta, GA 30328 Committee ID: C00064766	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00	\$4,000.00	2018P: \$4,000.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2017</u>		CALIFORNIA FORM 460
through <u>12/31/2017</u>		
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. Number 1392928

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2017	Urban Associates, Inc. Los Angeles, CA 90022-5189	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$4,000.00	2018P: \$4,000.00
12/29/2017	Watson Land Company Carson, CA 90745	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$4,500.00	2018P: \$4,500.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL				\$282,250.00		

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 07/01/2017
through 12/31/2017

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
GIPSON FOR ASSEMBLY 2016 Inglewood, CA 90301 Committee ID: 1373829 <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,000.00		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$3,000.00 12/21/2017 DATE DUE	 RATE %	\$3,000.00 12/21/2016 DATE INCURRED	CALENDAR YEAR \$0.00 PER ELECTION** 2018P: \$3,000.00
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		RATE %		CALENDAR YEAR PER ELECTION**
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		RATE %		CALENDAR YEAR PER ELECTION**
SUBTOTALS							\$3,000.00	

Schedule B Summary

1. Loans received this period. \$0.00
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period \$0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) Net \$0.00
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 07/01/2017 through 12/31/2017	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
8/21/2017	California Life Sciences Association PAC Sacramento, CA 95814 Memo Reference: NON295 Committee ID: 1272633	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Fundraiser: Food and Beverages	\$940.56	\$940.56	2018P: \$940.56
8/24/2017	CA Independent Petroleum Assn. CIPAC State PAC Rancho Santa Margari, CA 92688 Committee ID: 822237	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Food and Beverages	\$829.94	\$4,329.94	2018P: \$4,329.94
10/24/2017	Californians Allied for Patient Protection Political Action Committee Sacramento, CA 95814 Committee ID: 920780	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Fundraising Event 4-Food/Beverages/Supplies	\$575.93	\$575.93	2018P: \$575.93
10/25/2017	AEG and Affiliated Entities Los Angeles, CA 90015	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Young Legislators Program Dinner Event Expenses	\$372.00	\$2,919.71	2018P: \$2,919.71
Attach additional information on appropriately labeled continuation sheets.					SUBTOTAL	\$2,718.43	

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.)..... \$2,718.43

2. Amount received this period - unitemized nonmonetary contributions of less than \$100 \$0.00

3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL** \$2,718.43

*Contributor Codes
IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460	
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through	12/31/2017	Page 37 of 80	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/14/2017	Payee Name: Gipson for Assembly Legal Defense Fund Candidate Name: Mike Gipson Legal Defense Fund Memo Reference: EXP220	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$30,000.00	\$41,000.00	2018P: \$41,000.00
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
	TREASURER Michelle Moore Sanders Inglewood, CA 90301	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/6/2017	Payee Name: Louise Dodson 4 ABC Trustee 2017 Candidate Name: Louise Dodson Board of Equalization Member District 2 Jurisdiction: City of Cerritos	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Contribution	\$300.00	\$300.00	2018P: \$300.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$78,691.86
- Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$78,691.86

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017


through 12/31/2017

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NAME OF FILER
 GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
 1392928

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/3/2017	Payee Name: Gipson for Assembly Legal Defense Fund Candidate Name: Mike Gipson Legal Defense Fund Memo Reference: EXP360	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$6,000.00	\$41,000.00	2018P: \$41,000.00
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
	TREASURER Michelle Moore Sanders Inglewood, CA 90301	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/29/2017	Los Angeles County Young Democrats	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Contribution	\$500.00	\$500.00	2018P: \$500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
11/29/2017	California Democratic Party	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Contribution	\$36,500.00	\$36,500.00	2018P: \$36,500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 07/01/2017


through 12/31/2017

CALIFORNIA
FORM 460

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NAME OF FILER
 GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
 1392928

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/14/2017	Payee Name: Gipson for Assembly Legal Defense Fund Candidate Name: Mike Gipson Legal Defense Fund Memo Reference: EXP416	<input checked="" type="checkbox"/> Monetary Contribution  <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$5,000.00	\$41,000.00	2018P: \$41,000.00
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
	TREASURER Michelle Moore Sanders Inglewood, CA 90301	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
12/6/2017	Bulletin Display, LLC	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Fundraiser: Food/Cigars/Supplies	\$391.86	\$391.86	2018P: \$391.86
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$78,691.86

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 07/01/2017 through 12/31/2017		CALIFORNIA FORM 460 Page 40 of 80
I.D. NUMBER 1392928		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Reporting Plus Inglewood, CA 90301	PRO		Political Accounting - June, 2017	\$1,517.50
Downtown & Vine Sacramento, CA 95814	FND		Venue/Food/Beverages	\$3,122.45
Roderick Wright Los Angeles, CA 90008-2834	FND		Reimbursement Expenditures	\$1,440.64

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$126,946.42
2. Unitemized payments made this period of under \$100.	\$35.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$126,981.42

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. NUMBER 1392928

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Eatalian Cafe Los Angeles, CA 90248	CVC		Pastors Breakfast	\$345.58
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Service	\$9.98
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Service	\$8.73
National Utility Consumer Rights Association (NUCRA) Inglewood, CA 90301	CVC		Donation	\$1,500.00
Eatalian Cafe Los Angeles, CA 90248	CMP		Pastors Breakfast	\$555.20

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460 Page <u>42</u> of <u>80</u>
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. NUMBER 1392928

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$120.41
Marc Kallweit Sacramento, CA 95818	CMP		2017-2018 CA Assm Portrait	\$125.00
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$4,941.00
Political Reporting Plus Inglewood, CA 90301	PRO		Political Accounting - July, 2017	\$1,792.50
Elane Douglas Sacramento, CA 95825	CMP		Reimbursement	\$25.85

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 07/01/2017 through 12/31/2017		CALIFORNIA FORM 460 Page 43 of 80
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Keara Joe Compton, CA 90220	CMP		Reimbursement	\$6.54
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$5,478.42
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$2,182.50
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$2,160.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$4,742.24

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>		CALIFORNIA FORM 460 Page <u>44</u> of <u>80</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kegeyan-Pappas Consulting Sherman Oaks, CA 91423	CNS		Fundraising Fees	\$7,585.00
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Services	\$18.62
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Service - ASSEM., SOS & Carson City Clerk	\$22.37
Veterans Park Volunteer Association Carson, CA 90745	CVC		Carson Midnight Basketball	\$750.00
River Cats Foundation Sacramento, CA 95814	CMP		Legislative All-Star Game	\$1,000.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Blue Print Restaurant Sacramento, CA 95814	FND		Food and Beverages	\$737.27
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$122.84
Political Reporting Plus Inglewood, CA 90301	PRO		Political Accounting - August, 2017	\$1,407.50
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Service	\$7.85
Keara Joe Compton, CA 90220	CMP		Reimbursement	\$43.44

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$122.14
Political Reporting Plus Inglewood, CA 90301	PRO		Political Accounting - September, 2017	\$1,297.50
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$4,959.61
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$4,064.76
Anedot Baton Rouge, LA 70808	CMP		Credit Card Processing Fees	\$284.25

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period from 07/01/2017 through 12/31/2017		CALIFORNIA FORM 460 Page 47 of 80
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kappa Alpha Psi Fraternity, Inc. - Los Angeles Chapter Los Angeles, CA 90019-6038	CMP		2018 Membership and Events	\$1,600.00
Christopher Wilson Signal Hill, CA 90755	CMP		Reimbursement Staff Outing	\$430.00
Rotary Club of Wilmington Wilmington, CA 90744	CMP		Dues and Donation	\$350.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$1,236.88
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$138.62

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Elane Douglas Sacramento, CA 95825	CMP		Expenditure Reimbursement	\$46.84
Political Reporting Plus Inglewood, CA 90301	PRO		Political Accounting - October, 2017	\$1,572.50
Louise Dodson 4 ABC Trustee 2017 Lakewood, CA 90715	CTB		Contribution	\$300.00
Committee ID: 1398213 Nossaman LLP Los Angeles, CA 90017	CMP		Political Campaign Law	\$2,337.50
Nossaman LLP Los Angeles, CA 90017	CMP		Political Campaign Law	\$255.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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Statement covers period		CALIFORNIA FORM 460
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through 12/31/2017		Page 49 of 80
NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. NUMBER 1392928

SEE INSTRUCTIONS ON REVERSE

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
African Focus, Inc. Carson, CA 90746	CVC		Donation	\$1,000.00
Kegeyan-Pappas Consulting Sherman Oaks, CA 91423	CNS		Fundraising Fees	\$6,115.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$1,803.14
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$1,860.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS		Fundraising Fees	\$1,820.80

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. NUMBER 1392928

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Aimee Brown-Nelson Studio City, CA 91604	CMP		Reimbursement Fundraiser Expenditures	\$289.62
Los Angeles South Bay Alumnae Chapter Carson, CA 90746	CVC		Scholarship Luncheon	\$150.00
Lux Marketing, Inc. Torrance, CA 90501	CMP			\$972.50
Los Angeles County Young Democrats Sacramento, CA 95815	CTB		Contribution	\$500.00
Committee ID: 921188 California Democratic Party Sacramento, CA 95811	CTB		Contribution	\$36,500.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. NUMBER 1392928

SEE INSTRUCTIONS ON REVERSE

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$138.70
Political Reporting Plus Inglewood, CA 90301	PRO		Political Accounting - November, 2017	\$1,875.00
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Service	\$36.26
Building Skills Partnership Los Angeles, CA 90015	CVC		2017 Toy Drive	\$250.00
Golden State Overnight Pleasanton, CA 94588	POS		Messenger Service	\$10.84

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER GIPSON FOR ASSEMBLY 2018		I.D. NUMBER 1392928

SEE INSTRUCTIONS ON REVERSE

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot Baton Rouge, LA 70808	CMP		Credit Card Processing Fees	\$97.80
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$4,981.00
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$1,328.73
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$3,832.00
Bankcard Center Salt Lake City, UT 84130	CMP		Expenditures	\$2,620.00

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SUBTOTAL \$126,946.42

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 07/01/2017
through 12/31/2017

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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$4,892.24	(\$150.00)	\$4,742.24	\$0.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$3,930.00	(\$1,770.00)	\$2,160.00	\$0.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$0.00	\$1,777.16	\$0.00	\$1,777.16

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$24,583.52
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$6,902.24
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** \$17,681.28
May be a negative number.

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 07/01/2017
through 12/31/2017

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FORM **460**

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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$0.00	\$3,270.00	\$0.00	\$3,270.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$0.00	\$2,160.00	\$0.00	\$2,160.00
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$0.00	\$1,717.50	\$0.00	\$1,717.50
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$0.00	\$938.86	\$0.00	\$938.86

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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Statement covers period
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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
McKinley Pillows Fundraising, Inc. Sacramento, CA 95814	CNS Fundraising Fees	\$0.00	\$2,220.00	\$0.00	\$2,220.00
Jacobson & Zilber Strategies, LLC Los Angeles, CA 90027	CNS Campaign Consulting/Strategy	\$0.00	\$10,000.00	\$0.00	\$10,000.00
Kegeyan-Pappas Consulting Sherman Oaks, CA 91423	CNS Fundraising Fees	\$0.00	\$4,420.00	\$0.00	\$4,420.00
SUBTOTALS		\$8,822.24	\$24,583.52	\$6,902.24	\$26,503.52

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 07/01/2017
through 12/31/2017

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Bankcard Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
United Airlines, Inc. San Francisco, CA 94128	TRC	Airfare Mike Gipson	\$341.60
Congressional Black Caucus Foundation, Inc. Fairfax, VA 22030	CMP	Annual Conference	\$165.00
United Airlines, Inc. San Francisco, CA 94128	TRC	Airfare CBC 2017	\$278.20
Maggianos Los Angeles, CA 90036	CMP	MTG: District Issues	\$131.39

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$916.19

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

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SCHEDULE G

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
One Lord One Faith One Baptism Christian Church Long Beach, CA 90805	CVC		Donation	\$200.00
AIRBNB San Francisco, CA 94103	TRS		CBC Accomodations	\$810.76
Bacon & Butter Sacramento, CA 95820	CMP			\$152.06
Safeway King Beach, CA 96143	CMP			\$177.52

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TOTAL* \$1340.34

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AT&T Carol Stream, IL 60197-5025	OFC		Communications	\$287.72
Eatalian Cafe Los Angeles, CA 90248	FND		Venue/Food/Beverages	\$353.10
Eatalian Cafe Los Angeles, CA 90248	CMP		Meeting: District Issues	\$353.10
Il Fornaio Cucina Manhattan Beach, CA 90266	CMP		Meeting: Campaign Issues	\$204.11

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TOTAL* \$1198.03

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DoubleTree Hotel Carson, CA 90745	CMP	Venue		\$206.18
Ristorante Lucia Boston, MA 02113	TRC	Meal		\$124.35
Drink Boston, MA 02210	CMP	Meeting: Conference Discussion		\$110.44
Ruth Chris Steak House Boston, MA 02108	CMP	Meeting: District Issues		\$173.44

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TOTAL* \$614.41

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Schedule G

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The Envoy Hotel Boston, MA 02210	TRC		Accommodations	\$1,257.66
Hertz Rent-A-Car Seattle, WA 98158-1200	TRC		Transportation Conference/Meeting	\$423.47
Morton's Sacramento, CA 95814	CMP		Members to Members Meeting	\$285.70
Home Depot Gardena, CA 90248	CMP		Supplies	\$168.26

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$2135.09

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Smart & Final Sacramento, CA 95818	CMP		Supplies	\$117.22
Sunh Fish Sacramento, CA 95818	CMP		Staff Team Meeting	\$217.33
Los Angeles Fish Company Los Angeles, CA 90013	CMP		Staff Team Meeting	\$204.25
Hotel Eldon Washington, DC 20001	TRC		Accomodations:Gipson 2017 CBC	\$717.93

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1256.73

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Schedule G

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FORM **460**

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GIPSON FOR ASSEMBLY 2018

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Hotel Eldon Washington, DC 20001	TRS		Accommodations:Staff 2017 CBC	\$239.51
St. Regis DC Dine Washington, DC 20006	TRS		Accommodations:Staff 2017 CBC	\$239.51
Gloria Brown's Washington, DC 20005	TRC		CBC Staff Meeting	\$106.20
Ming's Washington, DC 20001	TRC		Campaign TEAM Meeting	\$499.86

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TOTAL* \$1085.08

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Schedule G

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SCHEDULE G

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Fairmont Hotels San Francisco, CA 94108	TRC		Accommodations Conference	\$383.10
PECLA Carson, CA 90745	CMP		Fundraising Venue	\$597.78
Earthbar Los Angeles, CA 90071	CMP		Meeting: District Issues	\$101.34
Target Carson, CA 90746	CMP		Supplies for District Tour	\$241.84

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TOTAL* \$1324.06

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Mainstream First Class Limousine, Inc. Inglewood, CA 90302	CMP		Bus Rental for District Tour	\$1,728.00
Target Compton, CA 90220	CMP		Supplies for District Tour	\$186.26
Klaus K Hotel Helsinki, UK	TRC		CFEE Tour Meal	\$126.44
Caffe Amore Dublin, IE	TRC		CFEE Tour Meal	\$122.40

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TOTAL* \$2163.10

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Westbury Hotel Dublin, IE	TRC		CFEE Tour Meal	\$139.84
Enterprise Rental Car St Louis, MO 63105	TRC		Transportation Conference	\$177.80
Inn at Spanish Bay Pebble Beach, CA 93953	TRC		Accommodations Conference	\$227.10
Enterprise Rental Car St Louis, MO 63105	TRC		Transportation Conference	\$261.20

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TOTAL* \$805.94

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Flowers.com Carle Place, NY 11514	CMP		Event Decor	\$104.00
Tequila Jacks Long Beach, CA 90802	CMP		Meeting Staff	\$202.70
Asti Ristorante San Diego, CA 92101	TRC		Meeting Staff	\$100.28
Hotels.com Dallas, TX 75231	TRC		Accommodations	\$134.59

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TOTAL* \$541.57

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Hilton Hotel San Diego, CA 92101	TRC		Conference Accommodations	\$233.98
Hilton Hotel San Diego, CA 92101	TRC		Conference Meal	\$100.00
Eatalian Cafe Los Angeles, CA 90248	CMP		District Tour Catering	\$368.18
Hotel Maya Long Beach, CA 90802	CMP		District Tour Lunch	\$822.20

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1524.36

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2017	Page 68 of 80

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Bankcard Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Paragray Bar & Oven Sacramento, CA 95816	CMP		Meeting District Issues	\$110.50
Lucca Restaurant Sacramento, CA 95814	CMP		Meeting Staff	\$286.88
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$272.14
M&S Naples Naples, FL 34102	TRC		Meals	\$121.18

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$790.70

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Bankcard Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Ritz Carlton Naples, FL 34108	TRC		Conference Accommodations	\$957.87
One Lord One Faith One Baptism Christian Church Long Beach, CA 90805	CVC		Donation	\$100.00
Barnes & Noble Manhattan Beach, CA 90266	OFC		Supplies/Research	\$144.57
Il Fornaio Cucina Manhattan Beach, CA 90266	CMP		Meeting: District Issues	\$122.13

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1324.57

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 07/01/2017
through 12/31/2017

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FORM **460**

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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Bankcard Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Home Depot Gardena, CA 90248	OFC		Supplies	\$322.26
Paragray Bar & Oven Sacramento, CA 95816	OFC		Meeting: Campaign Team Issues	\$322.26
Walmart Torrance, CA 90505	OFC		Supplies	\$129.76
La Casita Rivera Long Beach, CA 90807	CMP		Meeting District Issues	\$130.67

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$904.95

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Bankcard Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Lodge at Torrey Pines La Jolla, CA 92037	CMP		Meeting	\$139.38
AT&T Carol Stream, IL 60197-5025	OFC		Phone/FAX	\$201.40
Enterprise Rental Car St Louis, MO 63105	CMP		Holiday Parade Event	\$158.15
Rusty Pot Restaurant Inglewood, CA 90301	CMP		Meeting District Issues	\$176.59

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$675.52

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Christopher Wilson

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Los Angeles Dodgers Los Angeles, CA 90012	CMP		Staff Outing	\$430.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$430.00

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
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SCHEDULE G

Statement covers period
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FORM **460**

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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Roderick Wright

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Sheraton Hotels Sacramento, CA 95814 Memo Reference: EDT2	FND		Reimbursement Accommodations Expenses	\$1,007.73
Hertz Rent-A-Car Sacramento, CA 95837 Memo Reference: EDT1	FND		Reimbursement Transportation	\$432.91

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1440.64

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.



SCHEDULE H

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NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
Gipson for Assembly Legal Defense Fund Inglewood, CA 90301 Memo Reference: RCV221 			\$30,000.00	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$30,000.00 7/14/2018 DATE DUE	0.00 % RATE	\$30,000.00 7/14/2017 DATE INCURRED	CALENDAR YEAR _____,000.00 ELECTION**
Committee ID: 1378039								
Gipson for Assembly Legal Defense Fund Inglewood, CA 90301 Memo Reference: RCV361 			\$6,000.00	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$6,000.00 11/3/2018 DATE DUE	0.00 % RATE	\$6,000.00 11/3/2017 DATE INCURRED	CALENDAR YEAR _____,000.00 ELECTION**
Committee ID: 1378039								
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.			SUBTOTALS					

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

** If Required

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period

from 07/01/2017

through 12/31/2017**CALIFORNIA FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
Gipson for Assembly Legal Defense Fund Inglewood, CA 90301 Memo Reference: RCV417				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$5,000.00 12/14/2018 DATE DUE	0.00 % RATE	\$5,000.00 12/14/2017 DATE INCURRED	CALENDAR YEAR PER ELECTION**
Committee ID: 1378039			\$5,000.00					
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	DATE DUE	% RATE	DATE INCURRED	CALENDAR YEAR PER ELECTION**
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.			SUBTOTALS	\$41,000.00	\$41,000.00			

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period	\$41,000.00
(Total Column (b) plus unitemized loans less than \$100.)	

** If Required

2. Payments received on loans	\$0.00
(Total Column (c) plus unitemized payments less than \$100.)	

3. Net change this period. (Subtract Line 2 from Line 1.) (Enter the net here and on the Summary Page, Column A, Line 7.)	NET	<u>\$41,000.00</u> (May be a negative number)
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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period

from 07/01/2017

through 12/31/2017

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GIPSON FOR ASSEMBLY 2018

I.D. NUMBER
1392928

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$00
- Unitemized increases to cash under \$100 this period..... \$00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: INC452
PRIMARY 2018

Memo Reference: INC453
GENERAL 2018

Memo Reference: NON295
Event costs at SAC fundraiser

Memo Reference: EXP220
Loan @ -0- Interest

Memo Reference: EXP360
Loan @ -0- Interest

Memo Reference: EXP416
Loan @ -0- Interest

Memo Reference: EDT1
Transportaion 6/25-6/29

Memo Reference: EDT2
Accommodations 6/25-6/28

Memo Reference: RCV221
Loan @ -0- Interest

Memo Reference: RCV361
Loan @ -0- Interest

Memo Reference: RCV417
Loan @ -0- Interest
